Case 4:19-cv-05041

Supplement to Complaint, Document Cover Sheet

Description;

Grievance #2019043975

Document Length, 4 pages, double and single sided

Document #25

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Texas Department of Criminal Justice

STEP 1

OFFENDER
GRIEVANCE FORM

OFFICE USE ONLY

***	·	Grievance Code: 625
Offender Name: Samuel Plop	Wins TDCJ# 1986831	Investigator ID #: <u>I 2584</u>
Unit: Stiles Housing A	ssignment: 3-A-57Top	Extension Date: <u>03-13-19</u>
Unit where incident occurred: Stiles	Unit 12629	Date Retd to Offender: MAR 19 2019
You must try to resolve your problem with a appealing the results of a disciplinary hearin Who did you talk to (name, title)? Dr Daw What was their response? The record what action was taken? The record with the results of the record with the record with the results of the resu	Jule does not have the new	when? 11/30/2018
Dr. DozTer Via BMS on I the medical notes. In the with "increased dysphoria	ed treatment for Grender Di 0/30/2018. Or Dozier up Subjective portion it wa towards physical appear	Josephatia I met with dated my treatment plan in snoted that I struggle - once. In the "Diagnosis
/Plan portion it concluded	that "Based on severe di	
penetit from being abbeto		Two aspects of that
(Mair and garb) were note	3	1 to 5000 0000 1) = 6000
On 1/30/2018 I met with	o Dr Davis of the Stiles	1 to implement this care
	cause in the "Pass module	
' '	m standards nor apantes	
module. She did renew in	_ J 5	
Please update the po	is module and provide	me-the appropriate
passes so that I can rec	erve the recommended to	ext ment for my Gender
Dasphorta.		
Thank you.	() () () () () () () () () ()	
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(CC) Copy retained.	Land of the second seco	TEUR
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West Art		
Action Requested to resolve your Complaint.		
Di	case update the pas	s module and provide mewith
Man agarage de passes so	-that Transcouration	Alba Tainan I I I I al
Offender Signature: Janua Hoppins	THAT I CONTICE IN	Date: 12/1/2019 DEEM 32018
		Date. The part of
Grievance Response:	·	
 Offender Hopkins, please 	be advised, after careful review of	your medical records, you indeed
saw NP Dozier via Telehe	ealth on 10/30/18. Although, within	NP Dozier clinic notes she
mentioned" Feels like ac	cess to female clothing and longer h	iair would help improve thoughts of
suicide and self-harm the	oughts," unfortunately medical has	no control of the policies set forth by
TDCJ regarding hair grow	th and panties. NP Davis was only o	doing as policies and procedures
informed her and would	allow her to do. In regards to suicid	al thoughts we do have trained
mental health clinicians o	on the unit that you can speak with	if a sick call is placed. You have been
provided care per policy.	This grievance is unsubstantiated.	y a sick can is placed. You have been
(1)	and to an another trace.	3/4/19
	bmit a Step 2 (I-128) to the Unit Grievance Inv	estigator within 15 days from the date of the Step 1 response.
State the reason for appeal on the Step 2 Form.	., i	
Returned because: *Resubmit this form when t	he corrections are made.	
1. Grievable time period has expired.		
2. Submission in excess of 1 every 7 days. *		OFFICE USE ONLY
3. Originals not submitted. *		Initial Submission UGI Initials:
4. Inappropriate/Excessive attachments. *		Grievance #:Screening Criteria Used:
5. No documented attempt at informal resolution.		
6. No requested relief is stated. *	- (1)	Date Recd from Offender: Date Returned to Offender:
7. Malicious use of vulgar, indecent, or physically t	reatening language.	
8. The issue presented is not grievable.		Grievance #:
9. Redundant, Refer to grievance #	<u> </u>	Screening Criteria Used:
10. Illegible/Incomprehensible *		Date Recd from Offender:
11: Inappropriate. *		Date Returned to Offender:
UGI Printed Name/Signature:		3rd Submission. UGI Initials:
		Grievance #:
Application of the screening criteria for this grie Affect the offender's health.	evance is not expected to adversely	Screening Criteria Used:
·		Date Recd from Offender:
Medical Signature Authority:		Date Returned to Offender:

I-127 Back (Revised 11-2010)

Case 4:19-cv-05041 Document 28-2 Filed on 08/31/20 in TXSD Page 3 of 25



I-128 Front (Revised 11-2010)

Texas Department of Criminal Justice

STEP 2

Offender Name: Somuel Hopkins

OFFENDER GRIEVANCE FORM

TDCJ# 1986831

OFFICE USE ONLY

(OVER)

Appendix G

UGI Recd Date: MAR 2

HQ Recd Date:

Grievance Code:

Date Due:

Unit: Telton House	ing Assignment: 12-(-37	Investigator ID#:
Unit where incident occurred: _\$\frac{5}{1}\$	les Unit	Extension Date:
	ep 1 Grievance that has been signed by the Ward ep 2 with a Step 1 that has been returned unprocesse	
	m dissatisfied with the response at Step 1 because	
	3/5/2019 with the extension attach	
Step I back and an	noughtry this Step 2 with the Ste	o I obtained , received 3/20/2019
Please also note. I'm not a	orcing Or Davis, she attempted to p	rounde my with the beneficia
	as the options were not available	
	engable to receive the beneficial	1. 1. 1. 11
t i	of The Diagnosty Plan" portion	
	could benefit from being able to	
Two aspects of that "Temal	e dothing and larger hour" Wes	e discussed.
	expression is cousing me a great	
	suite da ideatur mental hearth h	
and has encouraged me to t	IK to the gender specialist about	tt which intern has found
Aself in the roles. Very 5	imply ped, "Based apon severe d	Totros portest could benefit
	self as formale, Please provide me	
	. I have not been provided the	
benefit from.		
3.0		
(cc) my records.		
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YOUR SIGNATURE IS REQUIRED ON BACK OF THIS FORM

Case 4.19-CV-03041 Document 20-2 Filed 0	11 00/31/20 111 1 X3D Fage 3 01 23
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A A A	210.10.10
Offender Signature: Januel Hapkins	Date: 3 20 2019
Grievance Response:	
review of your medical grievance and documentation has been completed reg nd panties.	arding your medical request to have a pass for longer hair
ccording to the medical documentation you were seen in the gender dysphoriz	clinic on 01/30/2019. You feel having these things would
nprove your thoughts of suicide and self-harm. Unfortunately medical has no c	
f your hair or panties. You are advised to continue to attend your scheduled ap	
eelings of self- harm with the mental health staff. All policies and procedures h	ive been followed.
ocumentation in the medical record indicates you have been afforded access t	o proper medical care in accordance with Correctional
lanaged Health Care Policy E.37.1. You are advised to submit a Sick Call Reques	
valuation.	
STEP II MEDICAL GRIEVANCE PROGRAM OFFICE OF PROFESSIONAL STANDARDS	- u x ²
TDCJ HEALTH SERVICES DIVISION	
Signature Authority:	Date: 3 24 14
ACCOUNTY.	
Returned because: *Resubmit this form when corrections are made.	OFFICE USE ONLY
	Initial Submission CGO Initials;
1. Grievable time period has expired.	Date UGI Recd:
2. Illegible/Incomprehensible.*	Date CGO Reod:
3. Originals not submitted. *	(check one) Screened Improperty Submitted Continents:
4. Inappropriate/Excessive attachments.*	Date Returned to Offender:
5. Malicious use of vulgar, indecent, or physically threatening la	
☐ 6. Inappropriate.*	Date UGI Recd:
LI o. mappropriate."	Date CGO Recd:
	(check one) Screened Improperly Submitted
VVII	Comments:
CGO Staff Signature:	Date Returned to Offender:
	3 rd <u>Submission</u> CGO Initials:
	Date UGI Recd:
	Date CGO Recd:
	(check one)ScreenedImproperly Submitted
	Comments
	Date Returned to Offender:
1.138 Book (Paying) 11:3010)	Annandiv C
-128 Back (Revised 11-2010)	Appendix G

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Case 4:19-cv-05041

Supplement to Complaint, Document Cover Sheet

Description;

Grievance #2019076803

Document Length, 4 pages, double and single sided

Document #26

Stp 3-14-19
OFFICE USE ONLY

3-28-19

Grievance #: 2019076803

Date Received: 2-11-19

Grievance Code: 624

Investigator ID #: 0282

Texas Department of Criminal Justice

Offender Name: Samuel Hopkins TDCJ# 1986831

Unit: Telford Housing Assignment: 12-6-37 Unit where incident occurred: Telford	Extension Date: MAR {
You must try to resolve your problem with a staff member before you submit a formal coupling the results of a disciplinary hearing. Who did you talk to (name, title)? Medical Complaints Courd industry by What was their response? ID() does not allow me to receive individualization was taken? Necessary benefit at treatment was with held.	orden When? 2/1/19 8 1/30/19
State your grievance in the space provided. Please state who, what, when, where and the The WPATH Standards of Care (SUC) provide the standards furth Gender Dysphoria (60). These standards have been accepted by in the world including the American Medical Association, the American Psychological Association, and the	hetreatment of individuals with every major medical association he American Psychiatric World Health Organization.
Per the SOC, these standards apply in their entirety to institute The SOC outlines I treatment aptions. (I) Changes in gend Thorapy, (3) Swyery, and (4) Psychotherapy. For purposes swy and expression. These treatment aptions are designed to be coordinated as a pression. These treatment aptions are designed to be coordinated as a per the SOC". (3) or others, changes in general and are designed to be coordinated as a per the SOC".	er expression and role.c.(2) Hormon has exploring gender identity, roly traditional together based on the
Sufficient to allerante gorder dysphonia. Some portients may no change in gender role, but not sugery, others may need I gender dysphonia has become more individualized I saw Dr Gordon of the GD chinic in Galverton on 1/30/2011	ed hormones, a possible n otherwords, trentmontful
allowed to treat 60 with Hormone Therapy options. She would treatment such as garder role and expression but the total to do so. (amplicate Coordinator at the textual last who confirm	Tike to help me with additional and to the so (the very first I contacted the Medical
Policies and Actions have prevented mentron recentling individed in my medical record in the	idual-treatment.
127 Front (Position 1) 2010) VOLID SIGNATURE IS REQUIRED ON RACK OF	EUIC ECDM (OVED)

Case 4:19-cv-05041	Document 28-2 Filed on 08/	31/20 in TXSD Page 8 of 25
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	,	
Action Requested to resolve your Complaint.	issuant about a soulist avaisse	To (see 10/30/18) to be evaluated
Consider of the day of	150 may 10 dames explass	Ton (see 10/30/18), to be evaluated
	e os necaea.	
Offender Signature: Asmil Hiphiu		Date: 2/7/2019
Grievance Response:		
		•
Electronic medical record review indicate	s you have been afforded access to care	regarding your Gender Dysphoria
Medical does not have purview over secu	rity clothing and hair guidelines and you	will need to address those issues with the
unit TDCJ Administrator.		
	<i>p</i>	
(-)	1.1.2.1	
Signature Authority:	Verk / Mar =	Date: 35-19
f you are dissatisfied with the Step 1 respond, you may suitate the reason for appeal on the Step 2 Form.	notification (28) this Taylor and Taylor	stigator within 15 days from the date of the Step 1 response.
Returned because: .*Resubmit this form when	the concessions are made.	
1. Grievable time period has expired.		OFFICE VICE ONLY
2. Submission in excess of 1 every 7 days. *		OFFICE USE ONLY Initial Submission UGI Initials:
3. Originals not submitted. *		Griuvance #:
4. Inappropriate Excessive attachments. *		Screening Criteria Used:
35. No documented attempt at informal resolution.	*	Date Recd from Offender:
6. No requested relief is stated. *		Date Returned to Offender:
7 Malicious ase of vulgar, indecent, or physically	threatening language. *	2ad Submission UG! Initials:
N The issue presented is not grievable.		Officeappe #:
] 9. Redundant, Refer to grievance #	((!	Screening Criteria Used:
10. Illegible/Incomprehensible. *	. 1	Date Reed from Offender:
il. Inappropriate. *		Date Returned to Offender:
GI Printed Name/Signature:		3 rd Submission UGI Initials:
application of the screening criteria for this gr	jevance is not expected to adversaly	Grievance #:
ffect the offender's health.	- Inches to assistantly	Screening Criteria Used:
fedical Signature Authority:	1	Date Recd from Offender:
rearest organic rantim ity.	 	Date Returned to Offender:

127 Dani / Davinski 11 2010)

MAR 1 4 2019

MAR 1 8 2019

Grievance #: 4019076803

HQ Recd Date:



Give reason for appeal (Be Specific).

Texas Department of Criminal Metics

STEP 2

OFFENDER GRIEVANCE FORM

	GRIEVANCE FORM	Date Due: 04-28
Offender Name: Samuel Proba	TDCJ# 1986831	Grievance Code: Lody
	gAssignment: 10=6=37	Investigator ID#: 10352
Unit where incident occurred: 12111	d & John Sent a (Gol Veston)	Extension Date:

You must attach the completed Step 1 Grievance that has been signed by the Warden for your Step 2 appeal to be accepted. You may not appeal to Step 2 with a Step 1, that has been returned improcessed.

I am dissatisfied with the response at Step 1 because...

Thurs harmones, organical Figure 112010)

Appendix G

. Case 4:19-cv-05041	ocument 28-2 Filed on 08/31	/20 in TXSD Page 10 of 25
		A CONTRACTOR OF THE CONTRACTOR
Which I amfacting managed	o to my treatment Please so	se-the Stop I for that informat
Ecolopy retained Alloched: Grievane 201901	16803	
		The board
Offender Signature: John Japki Grievance Response:		Date: 3/11/2019
•	ou are not receiving appropriate treatment are requesting to receive care recommen	for your Gender Dysphoria by not receiving not ded regarding gender expression and to be
the mental health department concerning your	Gender Dysphoria. As stated in the Step 3 up should be addressed with the warden at Review of the documentation shows you leave.	orther review shows you continue to be followed by a response, any issues you may have concerning your unit of assignment, as these issues do not fall have received appropriate medical and mental
You are advised to submit a Sick Call Request if	you feel your physical or mental condition	has changed to warrant further evaluation.
		· · · · · · · · · · · · · · · · · · ·
Signature Authority: OFFICE OF PR	CAL GRIEVANCE PROGRAM ROFESSIONAL STANDARDS SERVICES DIVISION	_ Date: 3 20 19
Returned because: *Resubmit this form w	•	OFFICE USE ONLY
 ☐ 1. Grievable time period has expire ☐ 2. Illegible/Incomprehensible.* ☐ 3. Originals not submitted. ** 	COPY	Initial Submission Date UGI Recal: [Check one) Screened Improperly Submitted
4. Inappropriate/Excessive attachn	nents.*	Comments: Date Returned to Offender: 1
-	, or physically threatening language.	2 ⁻¹ Submission
☐ 6. Inappropriate.*		Describil Rest
	÷ .	(check one) Screened Improperly Submitted Comments:
CGO Staff Signature:		Date Returned to Offender.
1 . 1 9 S		3el Submission CGO Initials:
		Date CGO Pland
No.		(check one)ScreenedImproperly Submitted
, ,		Comments:

I-128 Back (Revised 11-2010)

Appendix G

Case 4:19-cv-05041

Supplement to Complaint, Document Cover Sheet

Description;

Grievance #2019125319

Document Length, 4 pages, <u>double</u> and single sided

Document #27

Grievance #:

Texas Department of Criminal Justice

STE	P I GRIEVANCE FORM	Date Received: 52017 Date Due: 6-29-19
Offender Name: Samuel Hopk	tins TDCJ#_1986831	Grievance Code: 508
,	Housing Assignment: 12-C-37	Investigator ID #:
Unit where incident occurred: _	Telford	Date Retd to Offerfull 1 1 2019

You must try to resolve your problem with a staff member before you submit a formal complaint. The only exception is when appealing the results of a disciplinary hearing. Who did you talk to (name, title)? Wardens Bates, Marshall, and Parker via I-69 When? 5/10/2019 What was their response? No response was given. What action was taken? No action was taken.

State your grievance in the space provided. Please state who, what, when, where and the disciplinary case number if appropriate I am transgender and diagnosed with gender dysphoria. IDCJ medical has asked that I address my concerns with security. TDCJ medical staff and administration are well aware that treatment this condition is a serious medical need and inadequate treatment jeopardizes an individual's physical health and mental well being. Medical has noted that I would benefit from some elements of "gender role and expression", the first treatment option listed in the Standards of Care (SOC) the accepted treatment standards for gender dysphoria. Failure to provide treatment in accord ith need places persons with gender dysphoria at substantial risk of serious harm that includes Sepression, anxiety, mental impairment, physical self-harm, and suicide. Refusal to provide reatment in spite of being aware of the serious harm caused by the failure tottreat indicates deliberated indifference to a serious medical need, a possible violation of the Eighth mendment's prohibition of cruel and unusual punishment,

Staff at Telford Unit have denied <u>my request for gender role and expression. Specifically T</u> ave been denied posession of panties and the ability to grow my hair to the length allowed ther women on women's units and this is a denial of an essetial part of my gender role and xpression. As a documented transgender female I am requesting to wear the same clothing and ollow the same policy that a cisgender woman would be <u>allowed to</u> follow.

Medical has advised me to speak to security and/or the warden at my unit. I contacted all hree wardens on my unit via I–60 and no one has responded.

McConnell Unit has allowed 3 inmates to grow their hair and it can be done here. Panties reate no issue and could be issued just like the bras are. What I am asking for can be done and sn't unreasonable. In addition it would stop the forced masculinization that causes me a great eal of distress and has resulted in the substantial risk of serious harm listed above. all nich have been documented in my record as a result of the forced masculinization and denial

YOUR SIGNATURE IS REQUIRED ON BACK OF THIS FORM

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<u> </u>		
·		
Action Requested to resolve your Complaint.	a (afficiency of the state of t	
I'm asking for permission to use and be regulated by female o	rooming standards	and to receive
and be allowed the use of panties. Thank You.		
Offender Signature: samuel Hopkins	Date: <u>5/18/201</u>	9
Grievance Response:	·	
Your grievance has been reviewed. Information received from th	ne Necessities Departm	ent
reveals panties are issued only on female units. The Court's Rulir		
grievance affects only three Native American offenders at the Mo		
assigned to a male unit will follow grooming standards set forth f		
Offender Orientation Handbook. At this time, transgender offen	ders assigned to male ι	units
may not grow their hair long.		
-		
Signature Authority: Bates	<u> </u>	Date: _()6 7019
If you are dissatisfied with the Step 1 response, you may submit a Step 2 (I-128) to the Unit Grievance Inve		
If you are dissatisfied with the Step 1 response, you may submit a Step 2 (I-128) to the Unit Grievance Investate the reason for appeal on the Step 2 Form. Returned because: *Resubmit this form when the corrections are made.		
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If you are dissatisfied with the Step 1 response, you may submit a Step 2 (I-128) to the Unit Grievance Investate the reason for appeal on the Step 2 Form. Returned because: *Resubmit this form when the corrections are made. 1. Grievable time period has expired. 2. Submission in excess of 1 every 7 days. * 3. Originals not submitted. * 4. Inappropriate/Excessive attachments. * 5. No documented attempt at informal resolution. * 6. No requested relief is stared. * 7. Malicious use of vulgar, indecent, or physically threatening language. * 8. The issue presented is not grievable. 9. Redundant, Refer to grievance # 10. Illegible/Incomprehensible. * 11. Inappropriate. * UGI Printed Name/Signature: Application of the screening criteria for this grievance is not expected to adversely	OFFICE U Initial Submission Grievance #: Screening Criteria Used: Date Recd from Offender: Date Returned to Offender: 2 nd Submission Grievance #: Screening Criteria Used: Date Recd from Offender: Date Returned to Offender: Date Recd from Offender: Date Recd from Offender: Date Returned to Offender: 3 nd Submission Grievance #:	USE ONLY UGI Initials:
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Appendix G

Grievance #: 20

HQ Rect Date:

Grievance Code:

Investigator ID#

Extension Date:



Offender Name: Samuel Hopkins

Unit where incident occurred: <u>Telford</u>

COPY

Housing Assignment: 12-C-37

Texas Department of Criminal Justice

STEP 2

OFFENDER GRIEVANCE FORM

TDCJ#1986831

You must attach the completed Step 1 Grievance that has been signed by the Warden for your Step 2 appeal to be accepted. You may not appeal to Step 2 with a Step 1 that has been returned unprocessed.
Give reason for appeal (Be Specific). I am dissatisfied with the response at Step I because I am transgender and diagnosed with gender dysphorie. TDC3 medical has asked that I address my
concerns with security. TDCJ medical staff and administration are well aware that treatment of
this condition is a serious medical need and inadequate treatment jeopardizes an individual's
physical health and mental well being. Medical has noted that I would benefit from some element
of "gender role and expression", the first treatment option listed in the Standards of Care (Sou
the accepted treatment standards for gender dysphoria. Failure to provide treatment in accord
with need places persons with gender dysphoria at substantial risk of serious harm that include
depression, anxiety, mental impairment, physical self-harm, and suicide. Refusal to provide
treatment in apite of being swere of the serious harm caused by the failure to breat indicates
deliberate indifference to a serious medical need, a possible violation of the Eighth
Amendment's prohibition of cruel and unusual punishment.
Staff at Telford Unit have denied my request for gender role and expression. Specifically I
have been denied possession of panties and the ability to grow my heir to the length allower
other women on women's Unite and this is a demai of an essential part of my gender cale and
expression. As a documented transgender female I am requesting to wear the same clothing and
follow the same policy that a cisgender woman would be allowed to follow.
Medical has advised me to speak with security and/or the warden of my unit. I contacted all
three wardens on my unit and no one has responded. I filed the Step 1 and was winsuccessful in
my attempts to raciave important elements of gender role and expression.
McConnell Unit has allowed 3 inmates to grow their hair and it can be done hare. Panties
create no issue and could be issued just like the bras are. What I am asking for can be done an
isn't unreasonable. In addition it would stop the forced masculinization that causes me a great
I-128 Front (Revised 11-2010) YOUR SIGNATURE IS REQUIRED ON BACK OF THIS FORM (OVER)

graph, all of which have been documented in my rece	
ion and denial of gander role and expression congru	ent with my gender identity.
	and the state of t
ender Signature: Jamus Heakins	Date: 6/14/2019
evance Response:	
All the second s	
uming Servi	
	*
	Showing Co.
Your Step 2 grievance has been investigated by this office	co. You were appropriately adviced at
Step 1 level. Please refer to that response. No further as	flon is warranted
Step 1 level. Flease Leter to macresponse, two immerial	Contract and the Contract and C
And the second of the second o	* **
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1-128 Back (Revised 11-2010)

Appendix G

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Case 4:19-cv-05041

Supplement to Complaint, Document Cover Sheet

Description;
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Grievance #2019094320

Document Length, 4 pages, <u>double</u> and single sided

Document #28

Grievance #: 2019094320

TE O

Texas Department of Criminal Justice

STEP 1

OFFENDER GRIEVANCE FORM

	Grievance Code
Offender Name: Samuel Hopkins TDCJ# 1986831	Investigator ID #: 0282
Unit: Telford Housing Assignment: 12-637	Extension Date:
Unit where incident occurred: Telford	Date Retd to Offender APR 1 1 2019
You must try to resolve your problem with a staff member before you submit a formal cappealing the results of a disciplinary hearing.	
Who did you talk to (name, title)?	When? 3/13/19 Ppp 8 PM
What was their response? They said I would get confiscution pape	
What action was taken? They serzed my underwear, did not provide	
State your grievance in the space provided. Please state who, what, when, where and the	
I am a partial-op transwoman with medical recommendations.	
as a part of my treatment plan for Gender Dysphoria (GD) (see	
To date TDCJ has issued me bras only. For the lost 11 months]	
funde unlerwear, parties. It has caused no disruption to the	predominantly male
environment and in fact was un remarkable.	2 11/
Upon arrival at this Unit in January I had 4 pairs of parties	
le ourng me with one pair. On 3/13/2019 at approximately 8	
Sof Shain showed particular interest in my bras intrally, questi	
finding my porties he loudly mocked them as a though enk	
and invides, they were actually a conservative full cut bite	
medical recommendations for them. He took them, head them trad	
papers so I could document the interference in my medical t	
provide them. Chance Biggers call 12- CH witnessed the excha	
witness. No papers have been provided therefore I am docume	~
UnderTexas Statutes, title 4 Executive Brown, Switche 6, Se	c301.004 it states; " Inc
department may allow in modes to wear und erwear not furnished	by the department.
The 35 was here then are the following: 1) I have recomm	nend atoms for panties, a) which
by law TDit may allow me to have 3) That having and wer	ating them continuously for
a ported of I munths created no sufety or security conce	ms of note that would
Justify Setzing them; and 4) that TDEN officers are setze My medical treatment.	ng them and interfering with
3	
cc) (opy retained	
- , 12	

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	<u></u>
	
•	·
action Requested to resolve your Complaint. The I have of printed	in My Size, For normal wear and
	ining size for normal was one
that IDCT officers stop seizing them.	
Offender Signature: Saltuel Hopaus	Date: 3/16/19
Grievance Response:	
D. I. I.C. I.I.C.	
Be advised Sgt J Shaw was questioned regarding	
cated. Sgt Shaw has provided a written statemer	nt denying that allegation.
Property Officer J Hughes was also contacted an	d she stated you did not
come to Telford Unit with panties and panties a	•
as boxers are provided. No further action is war	ranted.
A_{2}	Ruber - Allie
Signature Authority: If you are dissatisfied with the Step 1 response, you may submit a Step 2 (I-128) to the Unit Grievance Inve	petigrator within 15 days from the date of the Step 1 response
State the reason for appeal on the Step 2 Form.	asugator within 13 days from the date of the Step 1 response.
Returned because: *Resubmit this form when the corrections are made.	
☐ 1. Grievable time period has expired.	
2. Submission in excess of 1 every 7 days. *	OFFICE USE ONLY
3. Originals not submitted. *	Initial Submission UGI Initials:
4. Inappropriate/Excessive attachments. *	Grievance #:
5. No documented attempt at informal resolution. *	Screening Criteria Used:
	Date Recd from Offender:
6. No requested relief is stated. *	Date Returned to Offender:
7. Malicious use of vulgar, indecent, or physically threatening language. *	2nd Submission UGI Initials:
8. The issue presented is not grievable.	Grievance #:
9. Redundant, Refer to grievance #	Screening Criteria Used:
10. Illegible/Incomprehensible. *	Date Recd from Offender:
11. Inappropriate. *	Date Returned to Offender:
UGI Printed Name/Signature:	3rd Submission UGI Initials:
	Grievance #:
Application of the screening criteria for this grievance is not expected to adversely Affect the offender's health.	Screening Criteria Used:
theorem offender a meagin.	Date Reed from Offender:
Medical Signature Authority:	Data Returned to O'Condage

I-127 Back (Revised 11-2010)

Case 4:19-cv-05041 Document 28-2 Filed on 08/31/20 in TXSD Page 18 of 25



Rivi Justice Texas Departmen C

STRP 2

OFFENDER GRIEVANCE FORM

OFFICE USE ONLY

Grievance #: 2019094327

UGI Recd Date: APR 17 2019

110 Reed Date:

	Drate Diale:
	Seriessonse Codes 5/8
Unit: Telford Housing Assignment: 12-6-37	Investigation III 312
Unit where incident occurred: Telford	Extension Date:

You must attach the camplesed Step 1 Gelevance that her begin signed by the Warden for your Step 2 uppell to be accepted. You may not appeal to Step 2 with a Step 1 that has been returned unbracessed.

Give reason for appeal (Be Specific), I am dissatisfied with the response of Step 1 because. The statement that I made in the Step 1 still stands. Per Texas Gov't Code § 501,004 FThe department may allow immates to wear underwaar hot furnished by the department." My panties were not issued by the department but dere handmade 1 year soc. While Mrs. Hughes may not recell the seizure of my panties I have little doubt that Sut. Shaw does. Regarding Mughes, upon errival at the unit Mrs. Hughes discovered 3 pairs of panties in my bra bag. I did explain that I am a partial of Transwoman with medical recommendations for them. She said that she would speak to medical about it and since "medical" consisted of one employee with only a roster of incoming inmates the results were as expected, Sqt. Shaw was a different story altogether. We had extensive interaction that night. The entire top row 12-C-36 to 12-C42 was sent to the dayroom in boxers.

I wore shorts and a bra. In the dayroom he pointed at my chest and asked "what is that" referr-I wore snorts and a dra. In the dayroom he pointed at my chest and asked "what is that" referring to to my bra. I said it was a bra. He asked if they sold that on commissary (implying contrastant), I explained that "no, they issue them to me because I have breasts". He ordered me to get a t-shirt. I complied. He then supervised the ransacking of my bouse, He asked how many bras inmates were allowed to have, then accused me of lying, telling me that I can get in big trouble for lying to an officer. He loudly mocked my conservative briefs when they were found calling them a thong to the entire section, whereupon I loudly demanded confiscerion papers. I said that they were not a thong, said that I have medical recommendations for them and that I'm suing for trans rights. I had to be calmed down by 12-C-41 and 12-C-42 as I was manic by this point. I was velling for a minute or two about my panties. When the shakedown was finished he repeated my cell number and said he would provide me with confiscation papers. No papers were provided and

now it appears that Sgt. Show is denying the whole incident. In both cases officers were within their rights to seize my panties but by law they could also have allowed me to retain them. There was a choice. Both offivers were informed that I have gender dysphoria and have medical recommendations for them. Sgt. Shaw displayed derision and maliciousness showing deliberate indifference to my medical needs, Panties have created no threa to security, have been rether unremarkable until I came to this unit where the officers keep confiscating them. As it helps me with my gender dyaphoria I will of course replace them. It bothers no inmates, as a woman in fact it is expected. Forced masculinization is bizarre and

transgender one	. It causes dis	tress to man	y transgender	inmates li	ke myself.	In this day
it is clearly a	choice as the 1	aw permits th	ne department	to allow u	e to weer u	inderwear no
	e dep ar tment yet					
(6)	and the street of the street o		parameter and a superior of the superior of th			and the state of t
	Tarrell Hept		Experience of the second secon	Date:	allie Zan	Mildeliki Ing. Appropria kananganan and pananan india

An investigation was conducted into your request. Inventories reviewed do not reveal panties. Unless these items are specifically assigned to you as are the bras, they will not be allowed. No further action is warranted.

Signature Authority: T. PHILLIPS	- Pare: 71.19
Returned because: Resilimit this form when corrections are made.	OFFICE USE ONLY Initial Submission CGO Initials:
1. Grievable time period has expired.	Date UGI Reed
2. Illegible/Incomprehensible,*	Dutc CGO Rook
☐ 3. Originals not submitted. *	lehèckoné)SettenedImproperty Softwices
☐ 4. Inappropriate/Excessive attachments.*	Compens
	Date Returned to Offender.
5. Malicious use of vulgar, indecent, or physically threatening lauguage.	
6. Inappropriate.*	Date UG) Recif
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, , , , , , , , , , , , , , , , , , ,	Comments:
CGO Staff Signature:	Date Returned to Offenders
y ,	3 rd Submission CCO totals:
•	Date UGI Recd:
	Dale CCO Recdi
	teheck one) Screened Improperty Submitted
	Comments
	Date Returned to Offender:

Case 4:19-cv-05041

Supplement to Complaint, Document Cover Sheet Description;

Grievance #2019117999

Document Length, 4 pages, <u>double</u> and single sided

Document##29 · · ·

Grievance #: 2019117999

Date Received: 5-6-19

Date Due: 6-15-19

Grievance Code: 508



'Texas Department of Criminal Justice

STEP 1

OFFENDER GRIEVANCE FORM

Offender Name: Samuel Hopkins TDCJ# 1986831	Investigator ID #: 0282
Unit: Housing Assignment:	Extension Date:
Unit where incident occurred:Telford	Date Retd to Offender: 10N 1 4 2019
You must try to resolve your problem with a staff member before you submit a forma appealing the results of a disciplinary hearing. Who did you talk to (name, title)? <u>Wictor M. Raggs</u> (Sergeant of Corr Of	
What was their response? They repeated their order and yelled when	I asked their name.
What action was taken? Forced masculine gender expression, officer	orders were followed.
State your grievance in the space provided. Please state who, what, when, where and TDCJ is preventing me from grooming my hair according to my	
10/30/2018 and even further restricting it even beyond stated	grooming policy per the TDCJ
Offender Orientation Handbook. As this boils down to one issue	, restriction on my gender
expression as it relates to hair I'm grieving this as a single	issue.
At approximately 11:45 Am on 5/2/2019 I was stopped on my wa	y to chow by Victor M. Raggs,
(Sergeant of Corr Off.) who ordered me to get a hiercut. My ha	ircut was in compliance, cut
around the ears, on the neck, not a tail or mohawk, neither sh	ag nor afro, not a fad or
extreme. Safekeeping was on the way to chow and I asked if I c	ould be permitted to to eat with
safekeeping (I was worried about being forced to eat with popu	lation). He denied my request and
he walked me to the barbershop. I asked his name as I can't se	e well enough to read it and
ne started screaming at me about his name and that he was the	ouilding Sgt. At the barbershop
I was 3rd in line outside. Sgt Raggs had been selectively targe	eting transgender inmates for
forced haircuts. All of us were transgender females such as my	self who tend to wear our hair
longer and styled in a feminine manner consistent with our gen	der identity, but were compliant
with grooming standards according to the Offender Orientation	andbook. The Sgt did come
pack and allow us to go to chow and them get our hair cut. I co	omplied with all orders given.
Thile in the barbershop I asked if there were any posted rules	different from the Offender
)rientation Handbook and there were not.	
Forced masculine gender expression causes extreme distress,	for myself I broke down several
imes in response to the incident, ultimately getting help from	n mental health that afternoon.
cc) My records	

	
<u> </u>	
	
Action Requested to resolve your Complaint. Stop targeting of feminine bairstyles and also in my case to	also consider the use of female
grooming standards.	
Offender Signature: <u>Lamuel Haphias</u>	Date: 5/3/2019
Grievance Response:	
Your allegations have been reviewed and report	ed to the appropriate
authority for further review. According to your in	
Program Sgt Oakes stated that Sgt Raggs just ha	•
	•
enforcing haircuts and he was not targeting tran	
ed you are currently working on a lawsuit to allo	<u> </u>
longer hair. Information received reveals there is	, ,
resolve your complaint and grooming standards	must be adhered to.
Signature Authority Bat	C5 Date: (0-14R
if you are dissatisfied with the Step 1 response, you may submit a Step 2 (I-128) to the Unit Grievance Inve	estigator within 15 days from the date of the Step 1 response.
State the reason for appeal on the Step 2 Form. Returned because: *Resubmit this form when the corrections are made.	
1. Grievable time period has expired.	
2. Submission in excess of 1 every 7 days. *	OFFICE USE ONLY
3. Originals not submitted. *	Initial Submission UGI Initials:
4. Inappropriate/Excessive attachments. *	Grievance #:
5. No documented attempt at informal resolution. *	Screening Criteria Used:
☐ 6. No requested relief is stated. *	Date Recod from Offender:
7. Malicious use of vulgar, indecent, or physically threatening language. *	Date Returned to Offender: 2nd Submission UGI Initials:
8. The issue presented is not grievable.	2 nd Submission UGI Initials: Grievance #:
9. Redundant, Refer to grievance #	Screening Criteria Used:
10. Illegible/Incomprehensible. *	Date Recd from Offender:
11. Inappropriate. *	Date Returned to Offender:
JGI Printed Name/Signature:	3rd Submission UGI Initials:
Application of the screening criteria for this grievance is not expected to adversely	Grievance #:
Affect the offender's health.	Screening Criteria Used:
Medical Signature Authority:	Date Recd from Offender:



Texas Department of Parallustice

STEP 2

OFFENDER GRIEVANCE FORM

OFFICE USE ONLY

Grievance #: 201911 1400

UGI Recd Date:

HO Recd Date:

, 10.10	Date Due: 275 5	ĺ
Offender Name: 5 muel Hopkins TDCJ# 1986831	Grievance Code: 500	
Unit: Telested () Housing Assignment: 12-E-37	Investigator ID#: 10742 63-4	-
Unit where incident occurred: Telford	Extension Date:	- Constitution
		Name in

You must attach the completed Step 1 Grievance that has been signed by the Warden for your Step 2 appeal to be accepted. You may not appeal to Step 2 with a Step 1 that has been returned unprocessed.

Give reason for appeal (Be Specific). I am dissatisfied with the response at Step 1 because...

As I stated to Sgt. Dakes the issue is forced mesculinization or alternativey restriction on gender role and expression. As I stated in the Step 1, my hair was in compliance. As I explained to Sgt Dakes the individuals targetted that day were all transgender, we tend to wear our hair longer, Sot Raggs just happened to be the one pracking down on us but really it could have been anyone. I do not know if his actions were motivated by animus or not. The esum boils down to the first and lest paragraph of the Step 1. Please note that my hair was compliance when I was forced to cut, it and that I am complying with stated grooming policy. However please note that forced masculinization is causing me extreme distress. It has resulted in suicidel ideation and self mutilation all of which mental health is owere of. On the day of my forced haircut I was able to get help from mental health but ultimately it did result in self injury. Sgt Dakes is correct in that I am actively trying to get the issue of gender role and expression resolved. I have medical recommendations that have not resulted in any accommodations and have been pushed back onto having me, not medical, address this with security. I have attempted to do so, even going so far as to contact all 3 wardens on my unit. They did not respond. As far as I can tell no one has actually looked into even the possibility of accommodating my medical needs.

Longer hair has presented no security issues on female units, apparently isn't being used to smuggle contraband or is easily searchable. The largest prison system in the country outside of Texas, the Federal Bureau of Prisons, has had no issues with longer hair and has been size allowing hair of any length since at least 1996. What is going on here is that TDCJ has decided to rigidly enforce gender stereotypes and not permit gender role and expression for the transgender female inmates such as myself. This has resulted in psychological harm as well as sectual physical harm.

1-128 Front (Revised 11-2010)

YOUR SIGNATURE IS REQUIRED ON BACK OF THIS FORM

(OVER)

CC Copy retained. Offender Signature: Grievance Response: Step I addressed your concerns. Offeraier Orientation Handbook, page 12, male offenders shall keep their hair trimmed up the back of their neck and head. Hair shall be neatly cut. Hair shall be cut around the ears. Sideburns shall not extend below the middle of the ears. No block style, afro, or shag haircuts shall be permitted. No fad or extreme hairstyles/haircuts are allowed. No mohawks, tails, or designs cal into the hair are allowed. No further action warranted: Signature Authority: Returned because: *Resubmit this form when corrections are made. OFFICE USE ONLY Initial Submission CGO Initials: 1. Grievable time period has expired. Date UCI Recd 2. Illegible/Incomprehensible.* Date CGO Reod: (check one) Screened 3. Originals not submitted. * Comments: 4. Inappropriate/Excessive attachments.* Date Returned to Offender: 5. Malicious use of vulgar, indecent, or physically threatening language. 2nd Submission Date UGI Recd:_ 6. inappropriate.* Date COO Resti ichackanei Scranica Comment Dale Returned to Offender CGO Staff Signature: 3rd Submission Date UGI Recd Date CGO Recd

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Appendix G

Comments:

Date Returned to Offender: